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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/395,449 07/11/2002 *O.K.R.S.*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none R.S.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/07/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>Robert E. Hunter R.E.H.</i> Examiner's Signature Initials	GA	4	44	2

ADDRESS

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TITLE

Plastic mattress foundation

FILING FEE  RECEIVED 1312	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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